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7/18/08

FILED UNITED STATES DISTRICT COURT FOR THE
NORTHERN DISTRICT OF ILLINOIS

APR 17 2008

JUL 21 2008
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MICHAEL W. DOBBINS
CLERK, U.S. DISTRICT COURT
ANTONIO Thomas
 Plaintiff

IN FORMA PAUPERIS APPLICATION
AND
FINANCIAL AFFIDAVIT

v.
DONALD Hulick, Warden
 Defendant(s)

08CV 4113
 JUDGE CASTILLO
 MAGISTRATE JUDGE KEYS

Wherever is included, please place an X into whichever box applies. Wherever the answer to any question requires more information than the space that is provided, attach one or more pages that refer to each such question number and provide the additional information. Please PRINT.

I, ANTONIO Thomas, declare that I am the plaintiff petitioner movant (other _____) in the above-entitled case. This affidavit constitutes my application to proceed without full prepayment of fees, or in support of my motion for appointment of counsel, or both. I also declare that I am unable to pay the costs of these proceedings, and that I am entitled to the relief sought in the complaint/petition/motion/appeal. In support of this petition/application/motion/appeal, I answer the following questions under penalty of perjury:

1. Are you currently incarcerated? Yes No (If "No," go to Question 2)

I.D. # B3d607 Name of prison or jail: MCNAUL

Do you receive any payment from the institution? Yes No Monthly amount: \$10.00 (B)

2. Are you currently employed? Yes No

Monthly salary or wages: _____

Name and address of employer: _____

a. If the answer is "No":

Date of last employment: _____

Monthly salary or wages: _____

Name and address of last employer: _____

b. Are you married? Yes No

Spouse's monthly salary or wages: _____

Name and address of employer: _____

3. Apart from your income stated above in response to Question 2, in the past twelve months have you or anyone else living at the same address received more than \$200 from any of the following sources? Mark an X in either "Yes" or "No", and then check all boxes that apply in each category.

a. Salary or wages Yes No

Amount _____ Received by _____

b. Business, profession or other self-employment Yes No
 Amount _____ Received by _____

c. Rent payments, interest or dividends Yes No
 Amount _____ Received by _____

d. Pensions, social security, annuities, life insurance, disability, workers' compensation, unemployment, welfare, alimony or maintenance or child support Yes No
 Amount _____ Received by _____

e. Gifts or inheritances Yes No
 Amount _____ Received by _____

f. Any other sources (state source: _____) Yes No
 Amount _____ Received by _____

4. Do you or anyone else living at the same address have more than \$200 in cash or checking or savings accounts? Yes No Total amount: _____
 In whose name held: _____ Relationship to you: _____

5. Do you or anyone else living at the same address own any stocks, bonds, securities or other financial instruments? Yes No
 Property: _____ Current Value: _____
 In whose name held: _____ Relationship to you: _____

6. Do you or anyone else living at the same address own any real estate (houses, apartments, condominiums, cooperatives, two-flats, three-flats, etc.)? Yes No
 Address of property: _____
 Type of property: _____ Current value: _____
 In whose name held: _____ Relationship to you: _____
 Amount of monthly mortgage or loan payments: _____
 Name of person making payments: _____

7. Do you or anyone else living at the same address own any automobiles, boats, trailers, mobile homes or other items of personal property with a current market value of more than \$1000? Yes No
 Property: _____
 Current value: _____
 In whose name held: _____ Relationship to you: _____

8. List the persons who are dependent on you for support, state your relationship to each person and indicate how much you contribute monthly to their support. If none, check here No dependents

I declare under penalty of perjury that the above information is true and correct. I understand that pursuant to 28 U.S.C. § 1915(e)(2)(A), the court shall dismiss this case at any time if the court determines that my allegation of poverty is untrue.

Date: 4-14-08

Antonio Thomas
Signature of Applicant
Antonio Thomas
(Print Name)

NOTICE TO PRISONERS: A prisoner must also attach a statement certified by the appropriate institutional officer or officers showing all receipts, expenditures and balances during the last six months in the prisoner's prison or jail trust fund accounts. Because the law requires information as to such accounts covering a full six months before you have filed your lawsuit, you must attach a sheet covering transactions in your own account--prepared by each institution where you have been in custody during that six-month period--and you must also have the Certificate below completed by an authorized officer at each institution.

CERTIFICATE
(Incarcerated applicants only)
(To be completed by the institution of incarceration)

I certify that the applicant named herein, ANTONIO THOMAS, I.D.# B32607, has the sum of \$ 80.88 on account to his/her credit at (name of institution) MENARD CC.

I further certify that the applicant has the following securities to his/her credit: _____. I further certify that during the past six months the applicant's average monthly deposit was \$ _____.
(Add all deposits from all sources and then divide by number of months).

4/17/08
DATE

Geraldine Berry
SIGNATURE OF AUTHORIZED OFFICER
GERALDINE BERRY
(Print name)

Date: 4/17/2008

Time: 1:58pm

d_list_inmate_trans_statement_composite

Menard Correctional Center

Trust Fund

Inmate Transaction Statement

REPORT CRITERIA - Date: 10/01/2007 thru End; Inmate: B32607; Active Status Only? : No; Print Restrictions? : Yes;
 Transaction Type: All Transaction Types; Print Furloughs / Restitutions? : Yes; Include Inmate Totals? : Yes; Print Balance Errors Only? : No

Inmate: B32607 Thomas, Antonio

Housing Unit: MEN-N2-03-13

Date	Source	Transaction Type	Batch	Reference #	Description	Amount	Balance
						Beginning Balance:	1.91
10/11/07	Payroll	20 Payroll Adjustment	2841107		P/R month of 09/2007	8.50	10.41
10/12/07	Disbursements	81 Legal Postage	285359	Chk #82089	45623, DOC: 523 Fund Reimburse, Inv. Date: 10/12/2007	-.17	10.24
10/17/07	Point of Sale	60 Commissary	2907116	676146	Commissary	-7.83	2.41
11/06/07	Mail Room	01 MO/Checks (Not Held)	3102113	116367	Jackson, Loretta	30.00	32.41
11/07/07	Payroll	20 Payroll Adjustment	311159		P/R month of 10/2007	10.00	42.41
11/13/07	Point of Sale	60 Commissary	317712	680626	Commissary	-40.10	2.31
12/07/07	Payroll	20 Payroll Adjustment	341169		P/R month of 11/2007	10.00	12.31
12/17/07	Point of Sale	60 Commissary	351767	688265	Commissary	-12.08	.23
01/07/08	Payroll	20 Payroll Adjustment	007159		P/R month of 12/2007	6.46	6.69
01/22/08	Point of Sale	60 Commissary	022793	694307	Commissary	-5.80	.89
01/23/08	Mail Room	01 MO/Checks (Not Held)	0232113	493470	Jackson, Loretta	50.00	50.89
02/07/08	Payroll	20 Payroll Adjustment	038159		P/R month of 01/2008	6.12	57.01
02/11/08	Point of Sale	60 Commissary	042779	698207	Commissary	-56.30	.71
03/10/08	Payroll	20 Payroll Adjustment	070169		P/R month of 02/2008	8.50	9.21
03/11/08	Point of Sale	60 Commissary	071702	704765	Commissary	-8.79	.42
03/17/08	Mail Room	01 MO/Checks (Not Held)	0772104	497414	Jackson, Loretta	50.00	50.42
04/04/08	Payroll	20 Payroll Adjustment	095169		P/R month of 03/2008	10.00	60.42
04/08/08	Point of Sale	60 Commissary	099746	709955	Commissary	-29.54	30.88
04/14/08	Mail Room	01 MO/Checks (Not Held)	1052113	173280	Thomas, Ann	50.00	80.88

Total Inmate Funds: 80.88

Less Funds Held For Orders: .00

Less Funds Restricted: .00

Funds Available: 80.88

Total Furloughs: .00

Total Voluntary Restitutions: .00